CUT VOUCHER AT DOTTED LINE BELOW.

DO NOT SEND ENTIRE PAGE



Please do not staple FORM VA-5 EMPLOYER'S RETURN OF VIRGINIA INCOME TAX WITHHELD	Make Check or Money Order Payable to: VA Department of Taxation		VA Income Tax Withheld			I	
VIRGINIA DEPARTMENT OF TAXATION P.O. BOX 27264, RICHMOND, VA 23261-7264 FOR INFORMATION CALL (804) 367-8037			Previous Period(s) Adjustments (See Instructions)			L	
FOR PERIOD ENDING DUE DATE AC	COUNT NUMBER FEIN NUMBER		Adjusted Total			I	
		4.	Penalty (See Instructions)			I	
		5.	Interest (See Instructions)			I	
I declare that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.			Total Amount Due				
Ñ							